

FORM MUST BE TYPED

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 5011Name: Viking Resources, Inc.Address: 105 S. Broadway, Ste 1040City/State/Zip: Wichita, KS 67202-4224Purchaser: N/AOperator Contact Person: Shawn DevlinPhone: (316) 262-2502Contractor: Name: Pickerell Drilling Co.License: 5123Wellsite Geologist: Rob Patton

Designate Type of Completion

 New Well Re-Entry Workover Oil SWD SIOW Temp. Abd. Gas ENHR SIGW Dry Other (Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-Entry: old well info as follows:

Operator: Ensign OPerating CompanyWell Name: DollComp. Date 33865 Old Total Depth 4450 Deepening Re-perf. Conv. to Inj/SWD Plug Back PBTD Commingled Docket No. Dual Completion Docket No. Other (SWD or Inj?) Docket No.

10/25/93 10/27/93 10/27/93
 Spud Date of REENTRY Date reached TD Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover, or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Shawn DevlinTitle Vice President Date 2/10/95Subscribed and sworn to before me this 10 day of February19 95Notary Public Pamela K. BrannonDate Commission Expires 11/8/95

9-16-30 W

COPY

API NO. 15- 101-21,630-0001

County LaneNE SW NW Sec 9 Twp 16 Rge 30 E3630 Feet from N (circle one) Line of Section4290 Feet from E (circle one) Line of Section

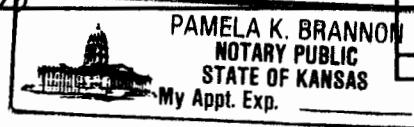
Footages Calculated from Nearest Outside Section Corner:

NE NW or NE (circle one)Lease Name Doll Well # #1 OWWOField Name unknownProducing Formation NoneElevation: Ground 2686 KB 2691Total Depth 4451 PBTDAmount of Surface Pipe Set and Cemented at 324 FeetMultiple Stage Cementing Collar Used? Yes X NoIf yes, show depth set FeetIf Alternate II completion, cement circulated from feet depth to w/ sx cmtDrilling Fluid Management Plan UNSUCCESSFUL REENTRY JH
(Data must be collected from the Reserve Pit) 2-16-96Chloride Content 5000 ppm Fluid volume 100 bblsDewatering method used Evaporate RECEIVEDLocation of fluid disposal if hauled offsite: KANSAS CORPORATION COMMISSIONOperator Name Shawn Devlin Date FEB 10 1995Lease Name Doll Conservation Division WICHITANSQuarter 1 Sec. 1 Twp. 16 S Rng. 30 E/WCounty Lane Docket No. 101-21,630-0001

K.C.C. OFFICE USE ONLY
 F Letter of Confidentiality Attached
 C Wireline Log Received
 C Geologist Report Received

Distribution

KCC
 KGS SWD/Rep
 Plug Other
 (Specify) JF



Form ACO-1 (7-91)

W 92-33-9

SIDE TWO

Operator Name Viking Resources, Inc.Lease Name Doll Well # #1 OWWOSec 9 Twp 16 Rge 30 East WestCounty Lane

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving Interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheets if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Name	Top	Datum
Cores taken	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
Electric Log Run (Submit Copy)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
List All E. Logs Run:					

CASING RECORD							
<input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, Intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs/Ft	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surf 9cc Already in hole							

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/type Specify Footage of Each Interval Perforated			Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used Depth)	

TUBING RECORD			Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Inj			Producing Method						
D&A			Flowing	Pumping	Gas Lift	Other (Explain)			
Estimated Production Per 24 Hours	Oil	N/A	Bbls	Gas N/A	Mcf	Water N/A	Bbls	Gas-Oil Ratio	Gravity

Disposition of Gas

METHOD OF COMPLETION

Production Interval

Vented Sold
(If vented, submit ACO-18.) Used on Lease

Open Hole Perf. Dually Comp Commingled

Other (Specify) _____